





July 16, 2013

Dr. Zubeida Moorjani

Sylvania, OH 43560

Re: Request for Information Letter from Deepak Moorjani

Dear Dr. Moorjani:

This letter is to confirm the outcome of our recent conversation regarding the Request for Information letter SagePoint Financial, Inc. received from Deepak Moorjani. I have enclosed a copy of Mr. Moorjani's letter in this mailing. Thank you for speaking with me.

It is my understanding that Mr. Moorjani does not have Power of Attorney or authorization to request information on your accounts held with SagePoint Financial registered representative, Suoeja Kummar. It is also my understanding that you have no issues or concerns with your dealings or relationship with Ms. Kummar.

Per our discussion, you do not give authorization for SagePoint to provide Deepak Moorjani with details or information about your accounts, and we will abide by your decision. If you have any further questions or concerns regarding this letter, please do not hesitate to contact me directly at (770) 916-6532.

Sincerely,

A handwritten signature in blue ink that reads "Michael L. Thorpe".

Michael L. Thorpe  
Compliance Officer

Cc: Mr. Deepak Moorjani;  
Ms. Suoeja Kummar



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/10/2010	201025200704	ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO. (LCP)	125.00	.00		.00	.00

### Receipt

This is not a bill. Please do not remit payment.

SUOEJA KUMMAR  
6029 RENAISSANCE PLACE  
SUITE D-2  
TOLEDO, OH 43623

## STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Jennifer Brunner**

**1962023**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**AJUS CONSULTANTS, LLC.**

and, that said business records show the filing and recording of:

Document(s):

**ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO.**

Document No(s):

**201025200704**



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus,  
Ohio this 8th day of September,  
A.D. 2010.

Ohio Secretary of State



Form 533A Prescribed by the:  
Ohio Secretary of State

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)  
[www.sos.state.oh.us](http://www.sos.state.oh.us)  
Busserv@sos.state.oh.us

Expedite this form: (select one)  
Mail form to one of the following:

Expedite PO Box 1390  
Columbus, OH 43216  
\*\*\* Requires an additional fee of \$100 \*\*\*

Non Expedite PO Box 670  
Columbus, OH 43216

**ARTICLES OF ORGANIZATION FOR A DOMESTIC  
LIMITED LIABILITY COMPANY**  
Filing Fee: \$125.00

(CHECK ONLY ONE (1) BOX)

(1) <input checked="" type="checkbox"/> Articles of Organization for Domestic For-Profit Limited Liability Company (115-LCA) ORC 1705	(2) <input type="checkbox"/> Articles of Organization for Domestic Nonprofit Limited Liability Company (115-LCA) ORC 1705
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Name of limited liability company

AJUS CONSULTANTS, LLC.

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd.," "or "ltd"

UPON FILING

Effective Date  
(Optional) 9-3-2010 (The legal existence of the limited liability company begins upon the filing  
mm/dd/yyyy of the articles or on a later date specified that is not more than ninety days  
after filing)

This limited liability company shall exist for  
(Optional)

PERPETUITY

Period of Existence

Purpose  
(Optional)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if additional provisions are attached

**ORIGINAL APPOINTMENT OF AGENT**

The undersigned authorized member(s), manager(s) or representative(s) of

AJUS CONSULTANTS, LLC.

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

SUO EJA KUMMAR

Name of Agent

6029 RENAISSANCE PLACE STE -D

Mailing Address

TOLEDO

City

Ohio

State

43623

Zip Code

If the agent is an individual and using a P.O. Box, check this box to certify the agent is an Ohio resident.

**ACCEPTANCE OF APPOINTMENT**

The undersigned, named herein as the statutory agent for

AJUS CONSULTANTS, LLC.

Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company

SuekaR

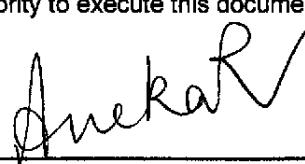
Agent's Signature

9/3/2010

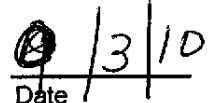
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document on behalf of the limited liability company identified above.

**REQUIRED**

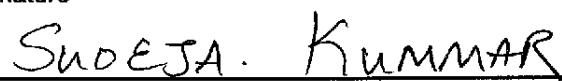
Articles and original appointment of agent must be authenticated (signed) by a member, manager or other representative.



Signature



Date



Print Name

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Signature

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Date

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Print Name

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Signature

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Date

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Print Name

**(See Instructions Below)**